

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) Senate Majority PAC | | FEC IDENTIFICATION NUMBER ▼ C C00484642 | |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | |
|---|-------------------|--|------------------------------|
| Full Name of Payee Waterfront Strategies | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 09 / 2016 | |
| Mailing Address 3050 K St NW Ste 100 | | Amount 217838.00 | |
| City Washington | State DC | Zip Code 20007-5108 | Transaction ID : VN7GBA1MT80 |
| Purpose of Expenditure Media Buy | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate Margaret Hassan | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NH | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|---|-------------------|--|--|
| Full Name of Payee | | Date of Public Distribution/Dissemination MM / DD / YYYY | |
| Mailing Address | | Amount | |
| City | State | Zip Code | Date of Disbursement or Obligation MM / DD / YYYY |
| Purpose of Expenditure | Category/ Type | | |
| Name of Federal Candidate | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|---|-----------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 217838.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | 217838.00 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Rebecca Lambe

[Electronically Filed]

Date

MM / DD / YYYY
07 / 11 / 2016

Signature